2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # L9800001085 1. Entity Name MOUSETRAP LICENSING, L.C.				FILED	
				00 JAN 25 PM 2: 45	
Principal Plac	ce of Business	Mailing Address		SECRETARY OF TALLAHASSEE, F	STATE I ORIDA
•		2600 LANTERN LANE NAPLES FL 34102-7726	TALLAHASSELT COM		
MAPLES FL 3		NAFLES FL 34102-1120		L LABORALI BYÖ LEYOT LÖKKY BAKK ADVIK BAKK A	0))) 42(0) (10)) 42(0) (10)() (11) (12)
Principal Place of Business 3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State		City & State		4. FEI Number Applied For Not Applied for Not Applied to	
Zip	Country	Zip	Country	5. Certificate of Status Desired	ΦE 00
6. Name and Address of Current Registered Agent Name				7. Name and Address of New Registere	ed Agent
				(P.O. Box Number is Not Acceptable)	
ATTN: THOMAS BAUR, ESQUIRE 100 N BISCAYNE BLVD, NEW WORLD TWR, 21 FL					
	33132-2306		City	F	Zip Code
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$50.00					
	•	Make Check Pa	yable to Department o	f State	
9.	MANAGING MEMBER		10.	ADDITIONS/CHANG	GES Addition
TITLE RAME	MGRM STEINFURTH, ULRICH	☐ Delete	TITLE RAME		Citatife ventent
STREET ADDRESS CITY-8T-ZIP	WIETZEAUE 37, D-30891 WEDEMARK, GERMANY		STREET ADDRESS CITY-ST-ZIP		
TITLE NAME	MGRM PFEFFER, KATJA	☐ Delete	TITLE NAME	400003112	2 <u>2™51aa</u> — □ Aα10 00 -01016014
STREET ADDRESS	SCHUTZENSTRASSE, 22, D-30853		STREET ADDRESS) *****50.00
TITLE	LANGENHAGEN, GERMANY MGRM	- Delete	*** **********************************	great states and a second	Change Addition
NAME STREET ADDRESS	THE HIGHLANDS GROUP, INC. 2600 LATERN LANE		NAME STREET ADDRESS	·	
CITY- \$T-ZIP	NAPLES FL 33940 MGRM		CITY-8T-ZIP ,		↑ Change ↑ Addition
NAME STREET ADDRESS	AMERICAN TRANSLATION BUREA	u, inc.	NAME STREET ADDRESS		
CITY-ST-ZIP	100 N. BISCAYNE BLVD., 21ST FL MIAMI FL 33132-2306	, <u>-</u>	CITY-81-ZIP		·
TITLE NAME		☐ Delete	TITLE MAME		Change Addition
STREET ADDRESS CITY-ST-ZIP			STREEY ADDRESS CITY-ST-ZIP		
TITLE		☐ Ociste	TITLE	·	Change Addition
NAME . ! STREET ADDRESS			NAME STREET ADDRESS		
11. I hereby	certify that the information supplied with the	nis filing does not qualify for	the exemption stated in Se	ection 119.07(3)(i), Florida Statutes. I further	certify that the information
indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: // CONTINUE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER / 1/8/2000 94/4348625					
				_ · / /	-